



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 6789

|   |   |                                |   |  |
|---|---|--------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>10/518,562  | <b>FILING OR 371(c) DATE</b><br>11/17/2005<br><b>RULE</b>   | <b>CLASS</b><br>424            | <b>GROUP ART UNIT</b><br>1615   | <b>ATTORNEY DOCKET NO.</b><br>4830-30PUS |
| <b>APPLICANTS</b><br>Buddy Ratner, Seattle, WA;<br>Connie Kwok, Seattle, WA;<br>Katie Walline, Boulder, CO;<br>Erika Johnston, Cambridge, MA;<br>Robert Miller, Cambridge, MA;  |   |                                |   |  |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/US03/19676 06/20/2003 which claims benefit of 60/390,665 06/21/2002   |   |                                |   |  |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                                |   |  |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged |   | <b>STATE OR COUNTRY</b><br>WA  | <b>SHEETS DRAWING</b><br>3  | <b>TOTAL CLAIMS</b><br>21                |
| Examiner's Signature _____ Initials _____   |   | <b>INDEPENDENT CLAIMS</b><br>2 |   |  |
| <b>ADDRESS</b><br>27799   |   |                                |   |  |
| <b>TITLE</b><br>Silicone blends and composites for drug delivery  |   |                                |   |  |
| <b>FILING FEE RECEIVED</b><br>780   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |